



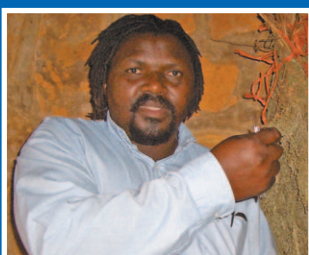
UNWELE OLUDE

PROUDLY BROUGHT TO YOU BY KZN DEPARTMENT OF HEALTH

FRIDAY, NOVEMBER 4, 2005



Feeding the hungry at hospital
Page 2



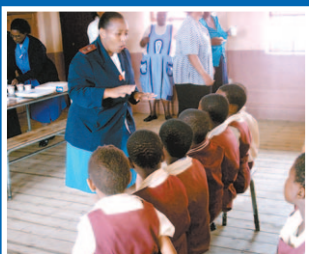
Hearing the call to healing
Page 3



Free screenings for eyes
Page 4



Using magnets for better health
Page 5



Health education at primary schools
Page 6



Healing the holistic way
Page 7

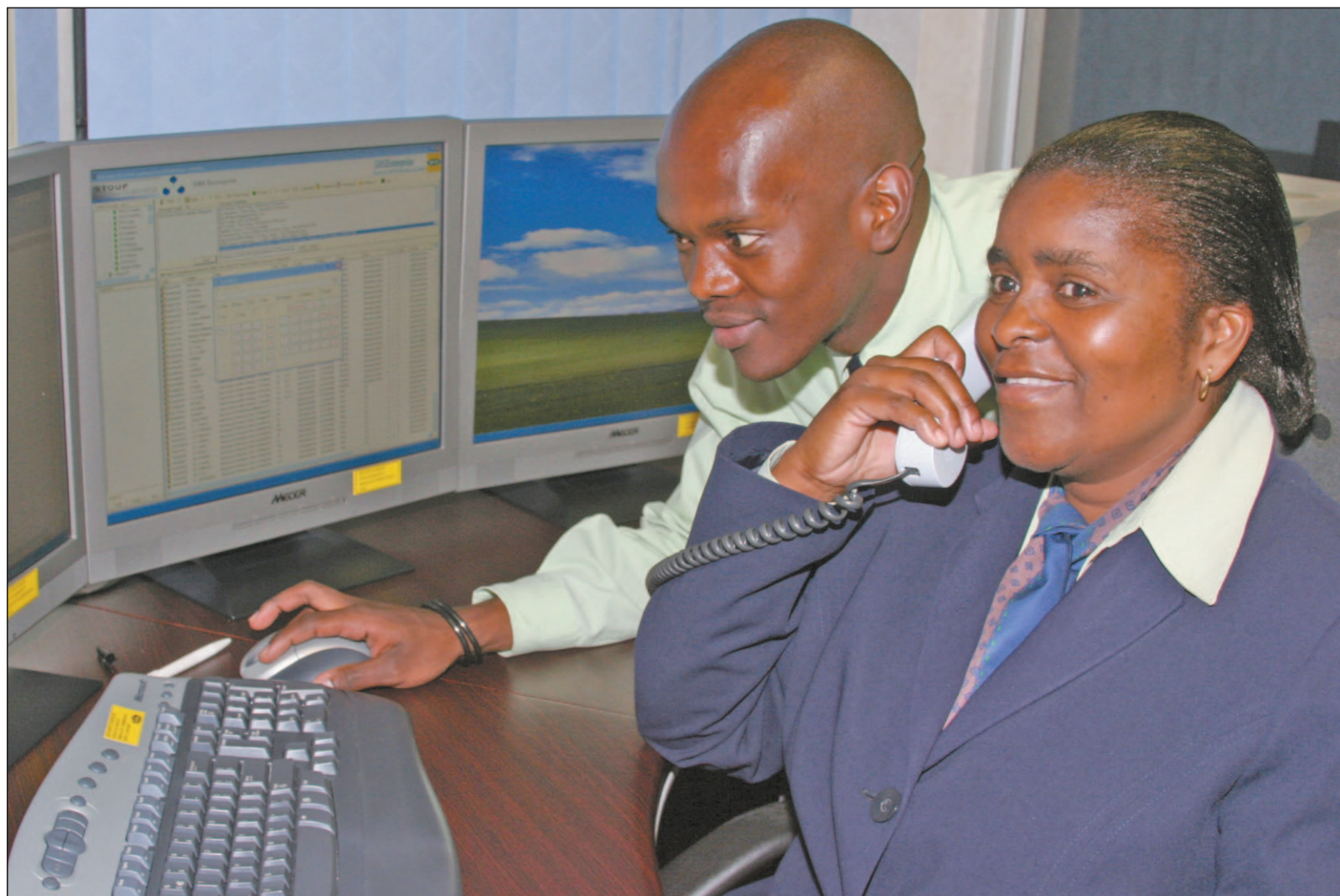


Photo: THEMBA MNGOMEZULU

24 HOURS A DAY, SEVEN DAYS A WEEK: The call centre has a dedicated team which mans the communication lines to provide advice and assistance in any type of the situation. Hard at work at the call centre is Nomusa Khanyile (left) and Mxolisi Thabede.

Thousands phone call centre

MBALI THUSI

IN August the Provincial Department of Health officially opened a 24-hour operations centre — a first of its kind in the country.

To access the operations centre, a toll-free number — 0800 005 133 — was established to give the public access to health information, advice and any other information or details that one may need when it comes to healthcare.

The Department of Health's head office is based in Pietermaritzburg on the 16th floor of Natalia. This state-of-the-art centre boasts modern and hi-tech equipment.

The establishment of the call centre was aimed at taking health care directly to the people as it provides an uninterrupted service to

the public by means of a radio communication system, facsimile, e-mail, SMS, landline and cellular telecommunications.

The public is taking advantage of the call centre and more than 4 509 calls have been received through the toll-free number to date.

"The establishment of this centre has led to great success in terms of the public accessing the department and in accelerating communication between the public and the department," said Kholekile Ntsobi, manager for emergency medical rescue services in the department.

He went on to say: "The call centre also helps us to respond timeously to emergency cases and with the tracking technology, the centre is geared up to pre-warn

emergency medical services and respond to emergencies quickly, thus improving our response time," said Ntsobi.

A large portion of the calls received were from people who requested information on HIV and Aids, and others were interested in finding out about antiretroviral medication.

"It is good that people are able to call us and talk about issues around HIV and Aids. It is also interesting that some people have contacted the call centre wanting to visit KwaZulu-Natal and asking for general health information. This means we are contributing in some way to tourism," he said.

The nature of other calls that have been handled by the call centre ranged from people wanting to

report abuse, corruption, fraud, missing persons, accidents, matters relation to labour, lack of safety and complaints. Every complaint is followed up.

The centre cost the department a hefty R3 million and 80% of this cost was contributed by the Global Fund.

The opening of the Operations Centre has created employment for more than 40 people, including those with disabilities.

With the festive season approaching, the work that is being done by the team at the call centre will no doubt help to enhance the efficient co-ordination of emergency medical care should crises arise.

The public can phone the call centre 24 hours a day, toll-free.

Tragic loss to the Emergency Medical Services family

THE Provincial Department of Health learned with shock and sadness of the untimely death of two of its emergency services staff members in a car accident recently.

Scelo Mbatha and Pravesh Chanda, both from the Greytown ambulance base, died on duty when the ambulance in which they were travelling collided with another vehicle.

They were transporting a 35-year-old pregnant woman who was in labour to Greytown Hospital. The patient, as well as the driver

of the other vehicle, were also killed in the accident.

The accident took place in the early hours of October 22.

This tragic event has robbed the department of emergency medical services family members and has left a huge gap in



Scelo Mbatha.



Pravesh Chanda.

the service.

The department would like to send its sincere condolences to the friends and families of Mbatha and Chanda, as well as to the crew who worked with

Nkonyeni, the head of department Professor Green-Thompson and the entire Department of Health send their heartfelt condolences to the bereaved families.

Nkonyeni said: "Our crews work through the day and night to save the lives of community members in need of emergency care."

"A loss is therefore not only a loss for the department and for the bereaved families but is indeed a loss to the whole community that these brave men served."

May their souls rest in peace.

them. The KZN MEC for Health, Peggy

'I AM REALLY SURPRISED THAT PEOPLE WHO DO NOT KNOW ME CAN BE SO KIND AND GENEROUS.'



Photo: THEMBA MNGOMEZULU

MOTHER OF TRIPLETS

It was the best present any mother could ask for. On October 17 the department handed over a bootload of baby clothing, donated by generous members of the public, to Lungile Makhathini, giving her more reason to celebrate that her triplets were one month old on October 18. When Makhathini (19) gave birth to her triplets — Simamukele, Sisanda and Samkelo — it made news. The fact that she and the father of the babies are unemployed made the caring for three babies an even heavier burden. Makhathini's plight touched the hearts of many and donations came in thick and fast. 'I am so happy. I am really surprised that people who do not know me can be so kind and generous to me. I can never say really how grateful I am. It will certainly help me for a long, long time because some of these clothes range from newborn to toddler,' said a jubilant Makhathini.

Keeping starvation at bay

At the age of 23 Elouise Casey has made a difference to poor patients who come through to Osindisweni Hospital with nothing in their stomachs. Casey, a dietician at the hospital in Verulam, co-ordinates a feeding programme with zero budget — but with faith and the willingness to lend a helping hand, she has put food on many tables. MBALI THUSI spoke to the charismatic and energetic Casey about the feeding programme and her career.

WHEN did you start working for the Department of Health? I started in January this year after finishing my studies at Stellenbosch University in the Western Cape. I am currently doing community service at Osindisweni Hospital. I am thoroughly enjoying the work I am doing here.

How did the feeding programme start?

I was approached by Dr Suraya Naidoo, who wanted to involve me in starting a feeding programme. As a dietician I am supposed to assist in food sustainability and household food security in the community. I agreed and in July this year we started the programme, which I am co-ordinating at the hospital. The patients and people who come to me for assistance are often referred by a doctor, nurse, physiotherapist or any other health worker who identifies them as needy.

How are you managing to keep the pro-

gramme going?

It is amazing how the local people in the community and the business people have opened up their hearts to give to the needy and the less fortunate.

People like Mr and Mrs Govender of Everest Flexible and Peggie Naidoo of Calypso Carriers are just some of the many people who are helping us with dona-

tions. I have even asked family and friends to donate food. Even staff members donate food.

What have you experienced since the programme started?

I have realised what abject poverty some

people live in and it saddens me. I have dealt with babies and children who are malnourished simply because they don't have anything to eat at home. I see grandparents having to carry the burden of looking after their grandchildren who have been orphaned. If I can help one person I know that I can make a difference and so far we have managed to continue.

"I get so much joy from seeing someone gaining weight and smiling just because they have food in their stomachs.

What have been the challenges?

It's sometimes difficult to identify those who are really in need from those who just want handouts or a free hamper. Regardless of this, we try our best to ensure that those who are needy get assistance. As the programme continues to grow, we hope we will be able to reach out to more people.

How do you unwind?

I love going to the beach and socialising with friends.



Left: Dietician Elouise Casey . . . 'It is amazing how the local people in the community and the business people have opened up their hearts to give to the needy and the less fortunate.'

Dietician Elouise Casey . . . co-ordinating a feeding programme at Osindisweni Hospital.



'I heard my ancestors' voices, telling me to heal people through plants.'

Photo: BONGANI HANS

The traditional healer who caters for all races

BONGANI HANS

ELLIOT Ndlovu, better known as Mluleki or Dr Ndlovu, is a traditional healer whose plants are making inroads in the Western world.

To find him, one has to navigate the narrow R103, through the majestic hills between Howick and Nottingham Road. About five to six kilometres from that small town is a colourful board on the left-hand side of the road, which points to the turn-off to Fordoun Spa, Hotel and Restaurant.

The hotel is the place where Ndlovu runs his business as an *inyanga* or *sangoma*, catering for all races, including overseas tourists.

Ndlovu, a father of two, is a strict businessman who does not tolerate people who are late for appointments. He works hard to make his traditional healing business grow and it looks as if he has succeeded in this, looking at his sophisticated medicine and three world-class consulting rooms. One does not have to contend with the rotting odour of animal skins or parts. He just uses plants and more plants.

Surrounding his traditional consult-

ing huts is a garden of different plants. He plants what he needs and once they have grown, he harvests the plants and sends them to Johannesburg, where they are processed and bottled.

They are then sent back to him, looking much like Western medicines.

"I'm well known and respected. I have appeared on television programs such as *50/50*, *Top Billing*, *Free Spirit* and *Focus*, explaining how to use traditional plants for healing in a way that does not open them to abuse.

"In 1997 I travelled to England with the National Botanic Institution (NBI) to participate in a competition about plants. We returned with a silver medal," said the dreadlocked *inyanga*.

Ndlovu's traditional healing career began in 1994 but he only started working with John Bates, manager of Fordoun, in the middle of last year.

To follow this career path, Ndlovu had to leave his job at Mooi River Textiles, where he had been employed from 1983 to 1989.

He dropped out of KwaMpande High School in 1979 because due to "pressure from his ancestors".

Around this time, he spent three hours in a deep pool in Mpofana, during which his ancestors kept talking to him about healing people.

“His ancestors sent him a message to quit his job.”

Relating the story, Ndlovu said he was working peacefully with his colleagues at the textile factory in 1989 when his ancestors sent him a message to quit his job and leave Mooi River because there was going to be political violence in the area and in the factory. Immediately after he left, trouble broke out.

"As I was at home in Thendele (rural area near Nottingham), doing nothing, I became manic. I ran for about 50 km until I came to Mpofana River. There I dived into a deep pool and stayed in it for about three hours. I couldn't see anything but heard the voices of my ancestors telling me to heal people with plants," said Ndlovu.

He added that he started to plant

different herbs in his small garden and used them to heal people who came to him.

Ndlovu also became involved in the local Vukani Skills Development programme, a community development project.

Coincidentally, he met Bates, who was also involved in the same project. At that stage Bates was running a livestock farm in the area.

Bates says: "We became close friends and, last year, when I decided to stop farming and open my hotel and restaurant, I invited Ndlovu to come and work with me because I had a feeling that his herbs could be used in my spa," said Bates.

Ndlovu was once a member of the KwaZulu-Natal Traditional Healers Association, but he said he left the organisation because he was unhappy with the way it was run. He refused to elaborate further.

When he is not consulting with his patients, Ndlovu is busy crushing African potatoes, also known as *inkomfe*, to make coffee.

He also uses the potatoes for healing purposes.

First Emergency Medical Services recruits training a success

MBALI THUSI

JUST over six months ago, the Provincial Department of Health embarked on a programme of training emergency care practitioners in basic life support.

This initiative started as a pilot programme driven by Emergency Medical Rescue Services (EMRS) in the department and is now bearing fruit. Since it was started as a pilot programme, only 50 candidates were to be recruited. Successful candidates started a three-month training programme in August of this year. They have recently graduated and they are ready to serve the public and provide emergency care.

The graduation of these recruits could not have come at a better time as we approach the festive season. It is anticipated that there will be an increased need for emergency services throughout this period.

The training was done at the EMRS training centre in the Ugu District on the south coast. The 50 recruits were selected from throughout the province and the selection criteria stated that candidates had to be unemployed, be in a possession of a Grade 12 certificate and had to be individuals who have not been presented with an opportunity to further their studies.

According to EMRS's Priya Maharaj, it is the first time that such a recruitment programme has been suc-

cessfully carried out in the country. "Almost all the recruits who have graduated are from the rural areas and 16 of them are female," said Maharaj. She went on to say they would be presented with opportunities to further their careers with EMRS.

"They can study further via our recently opened college at Northdale Hospital," said Maharaj.

As part of the transformation process, the department has unveiled and introduced rank insignias for all operation supervisors and officers. It is the first time in the history of Emergency Medical Services in South Africa that more than 150 emergency medical care supervisors have been confirmed and awarded their rank

insignias. This is aimed at strengthening governance and ensuring continuity of pre-hospital and in-hospital emergency medical care. The graduation ceremony of the 50 trainees coincided with the department's launch of Alpha Operation.

Fifty of 200 newly acquired ambulances were showcased at the graduation.

These will assist during Alpha Operation over the holiday season.

The operation aims to increase the number of ambulances on major routes during the holiday period.

The public will be advised through the media of the dates for sending in applications for the intake of the second group of recruits.

The community received free eye screening at the World Sight Day event held in the Umkhanyakude District. Here Senior General Manager Dr Sibongile Zungu took the opportunity to have her eyes screened by optometrist France Nxumalo.

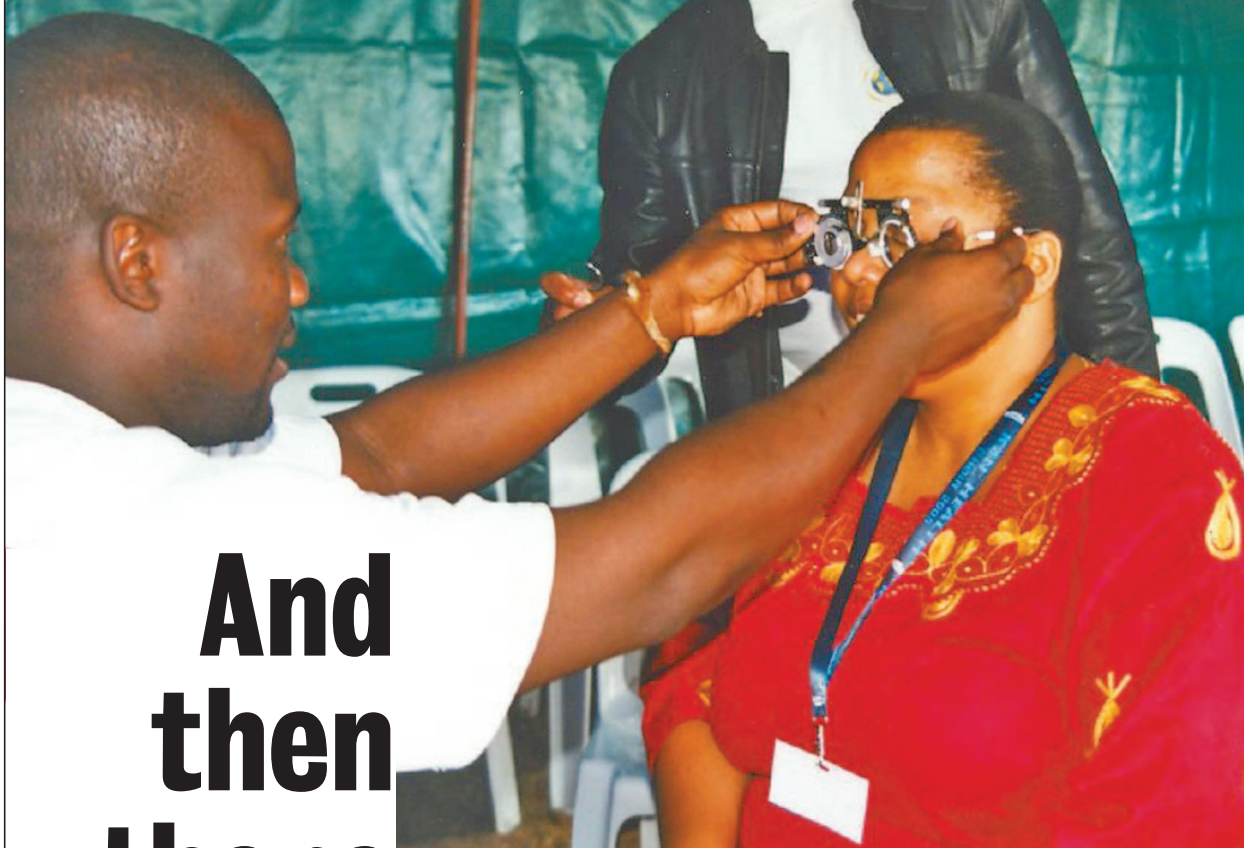


Photo: ROZ JORDAN

And then there was SIGHT

ROZ JORDAN

THE KwaZulu-Natal Department of Health, along with the rest of South Africa and the world, commemorated World Sight Day on October 13. This year the event was held at Mosvold Hospital in Umkhanyakude District.

World Sight Day is an annual event focusing on global blindness. It aims to create awareness around the world about the prevention and treatment of the loss of vision. With 13 hospitals in KwaZulu-Natal providing eye care surgery, every citizen of the province can be helped to prevent avoidable blindness.

Up to 80% of cases of blindness are avoidable, either resulting from pre-

ventable conditions (20%) or being treatable (60%) so that sight is restored. Prevention and treatment of vision loss are among the most cost effective and successful of all health interventions. These interventions include: cataract surgery to cure this eye disease relating to ageing, prevention of trachoma, provision of the drug ivermectin for the treatment of the infectious disease river blindness, immunisation against measles, provision of vitamin A supplements for the prevention of child blindness and the provision of eye glasses.

In KwaZulu-Natal, there are 60 000 blind people and 48 000 of these are needlessly blind. The most common cause of needless blindness in

KwaZulu-Natal is the cataract. It accounts for 60% of blindness. The cataract can result as a part of the ageing process. It is a clouding of the lens of the eye. It causes a gradual misting of vision, with no pain.

The causes of avoidable blindness are frequently associated with poverty and lack of access to eye care services. Avoidable blindness is more common in the poor, women and rural populations. The KZN Department of Health supports the global Vision 2020 initiative: the elimination of avoidable blindness by the year 2020. Visual disability has far-reaching implications, touching on all aspects of development — social and economic — and quality of life.

PREVENTION IS BETTER THAN CURE THIS SUMMER

AS the summer season looms, it is always anticipated that diseases such as cholera and malaria could surface. With the rainy season approaching, the department would like to remind the community to practise the best possible hygiene measures to ensure that any possible outbreak of disease is averted.

Malaria

Although every effort has been made by the KZN Department of Health to reduce malaria in the province, it is still advisable to take precautions when travelling to malaria areas, especially in northern KwaZulu-Natal.

- There are various malaria prevention tablets on the market.
- Use insect repellent on exposed skin.
- Sleep under a mosquito net or in a netted tent, hut, house or caravan with screens.
- Close windows and doors at night.
- Spray insecticide aerosol and/or burn mosquito coils at night.

Cholera

Cholera is a bacterial infection which is contracted by drinking contaminated water or by eating food which has been in contact with contaminated water, flies or soiled hands. The germs responsible for cholera are found in the stools of human beings. Profuse watery stools or diarrhoea that is sudden in onset, plus vomiting and rapid dehydration (caused by loss of body water) are some of the most common symptoms of cholera.

Although KwaZulu-Natal has been faced with an outbreak of cholera in the past, it is possible to visit cholera areas in absolute safety provided simple hygienic practices are followed.

The following simple guidelines must always be followed:

- Washing hands before meals, washing fruit and vegetables and washing hands after going to the toilet or touching pets.
- Do not allow children to play in dirty pools of water, rivulets or storm water outlets.
- If you are unsure of the water in a particular area, it is advisable to treat it before using it, drinking it or cooking with it. This can be done by boiling the water before drinking. Treat the water by adding one teaspoon of bleach to 25 litres of water and leave to stand for a minimum of two hours before drinking.

Typhoid

Good hygiene can also help prevent typhoid fever. Typhoid is caused by a bacterium and is contracted by drinking water or eating food contaminated by *salmonella*. Some of the symptoms include: continuous fever; headache; nausea and/or anorexia; constipation or diarrhoea; and/or hoarse cough.

Here are some guidelines for keeping you and your family safe:

- Cooking food thoroughly, boiling or adding bleach to drinking water and washing of hands can help halt the spread of the disease.
- Cooking kills typhoid — so thoroughly cook all meats, fish and vegetables. Eat them while they are hot.
- Wash your hands before preparing or serving food.
- Wash your dishes and utensils with soap and water.
- Wash your cutting board especially well with soap and water.
- Peel your fruit.
- Store drinking water in a clean container with a small opening or a cover. Use it within four hours. Pour from the water container — do not dip a cup into the container.
- Typhoid germs are invisible. They can be carried on your hands without your knowing it. When washing your hands, always use soap and plenty of clean water and wash the front and back of the hands and between the fingers as well as nails. Always use a toilet or latrine and keep it clean. Dispose of babies' faeces in the toilet or latrine (or bury them).
- Remember that polluted water is the most common source of typhoid.

Putting diabetes in the spotlight

MBALI THUSI

CHOCOLATE, sweets, cakes and chips, you name it — we all crave them from time to time.

For most teenagers chocolates, cakes and chips are all part of what they consider to be their staple diet. All this changed for 20-year-old Lelethu Gxagxisa when she found out that she was diabetic. For Gxagxisa it meant no pudding, ice cream or mince pies, as she found out on Christmas Eve that she was diabetic.

Gxagxisa, a web design student, says the symptoms had always been there. "I was passing urine a lot, I was extremely thirsty no matter how much cold drink or water I drank. I was always drowsy and my eyes would just shut by themselves," said Gxagxisa.

When she went for a blood sugar level test, it showed that her blood sugar levels were very high. "I was really scared but my family and friends were very supportive and understanding," said Gxagxisa.

She had to go on a tailored diet and inject herself with insulin four times a day.

"It took some getting used to but now it's okay and my friends at school always remind me to take my insulin injections. I have type one diabetes and that is why I have to have insulin injections," she says.

WHAT IS DIABETES?

On November 14 the world observes World Diabetes Day.

THERE are three types of diabetes, namely: type one, type two and gestational diabetes.

Type one diabetes: if a person has this type of diabetes it means the pancreas stops producing insulin. People with type one diabetes have to inject insulin into their bodies to survive. A combination of this and a balanced diet, as well as exercise, is important in managing the condition.

Type two diabetes: This type of diabetes occurs when the insulin is either not enough or does not work properly. Most people with diabetes have this type. Maintaining a healthy diet and lifestyle are important in managing type two diabetes. Medication can be administered. High blood glucose levels can lead to blindness, stroke or

heart attacks, kidney failure and amputation.

Gestational diabetes: Some pregnant women experience this during pregnancy and the condition disappears after birth. However, the mother and the baby could have increased chances of developing diabetes at a later stage.

Frequent urination, thirst, weight loss, fatigue, blurred vision, frequent infections, cuts and bruises that take time to heal, tingling and numbness in the hands or feet are common signs and symptoms of diabetes.

Dr Frederick Banting, who is credited with the discovery of the drug insulin, was born on November 14, which is why that date was chosen for World Diabetes Day.

— www.diabetessa.co.za

Gxagxisa has an injection 30 minutes before having a meal and has to have another at around midnight.

"I now follow a diet and have to eat either grilled, boiled, fat-free or low-fat foods and I am not supposed to eat salt and sugar," she added.

Gxagxisa says that although she is diabetic, she leads a normal, ener-

getic life, like many other young people, and is studying and looks after herself.

She urged those who show signs and symptoms of being diabetic to seek medical attention. "Those with diabetes must take their medication religiously and follow their eating plan, as advised by a doctor."

“If people are suffering from acute pain they should get treatment immediately, otherwise it results in chronic pain later.” says Wini Hartzenberg who works with magnetic healing. Her husband, long time advocate Con Hartzenberg, suffered from polio as a child which resulted in his legs being crippled. Although doctors gave him a life expectancy of only 40 years, Hartzenberg kept healthy by exercising and a healthy diet. In 2004 he started suffering from badly swollen ankles which required daily massages from his wife. Hartzenberg started looking at treatments which could help her husband.

“I started looking into magnetic healing, but couldn’t find anyone who supplied the necessary equipment. After searching a number of websites I found a link to one which required a password. I typed in an unrelated number and gained access to a website that gave me the contact details of a supplier. I contacted the supplier who was shocked that I managed to get hold of him.” After explaining what happened, Hartzenberg was told that she had gained access to the Israeli government’s official information bank, containing the details of all Israeli businessmen. “This probably didn’t go down well with the government because a few months later my whole hard drive was deleted beyond anything my computer-genie could salvage.” And that is the unusual story of how quirky Hartzenberg managed to track down a magnetic healing machine.

Spending time with Hartzenberg is therapeutic in itself due to her good sense of humour and her ability to see the absurdity in life. Formerly from Alberton, Hartzenberg moved to Pietermaritzburg where she studied librarianship at the university. This is also where she met her husband.

One of the first things I noticed in her consulting room is an exceptionally beautiful quilt, which she uses to cover patients. She belongs to the Midlands’ Quilters guild and the quilt was made by a member who had moved to England and had asked for sewing material due to a lack of funds. She sent the quilt to the guild to say thank you to the members, who raffled it to raise further funds. Hartzenberg won the quilt and says that because it was made with so much love, she likes to use it in therapy sessions. Another unorthodox part of the treatment is Aboo. Aboo is the khaki-coloured cat who participates in the therapy by jumping onto laps and lying nearby for the magnetic part of the healing.

The legend of the discovery of magnetism tells the tale of Magnes the Greek shepherd who noticed that some rocks pulled the nails from his shoes; he also realised that he could walk on these rocks for miles without suffering fatigue.

The Chinese have used magnets as an integral part of their medical world for years and in the 1860’s Dr Mesmer began testing the effects of magnets to heal headaches and other ailments. But it was received with much scepticism from conventional medicine practitioners. Magnetic healing is a form of inter-cellular healing which works on strengthening cell walls. When the body is ill, cell walls tend to become more porous and more susceptible to inva-

Healing with MAGNETS

INEZ WALES talks to Wini Hartzenberg about the healing powers of magnetic energy.



Wini Hartzenberg . . . ‘the treatment is visibly very beneficial for people suffering from arthritis and rheumatism’.

Photo: INEZ HARMIS

sion. Magnetic healing is completely safe and non-invasive. By inducing electrical changes in and around the cells, the oxygen pressure activates and regenerates the cells. Each cell has its own electrical field which is disturbed when disease strikes. The cell wall becomes porous, allowing fluid to enter, causing pain and swelling. Introducing a magnetic field helps the cell wall to stabilise and regain its health. Tired and damaged cells repair and replace themselves to ensure recovery and an absence of pain. Studies have shown that there is an increased absorption of calcium in the bones, leading to greater bone density and improved cartilage quality.

“The small magnets people used were too small to have an effect and only if you carried a whole rock around with you would it work. So they worked out a way to intensify the magnetic effect by placing coils around the magnets.” The problem with ordinary magnets is that the field of energy is weak and does not penetrate the body. With the invention of electricity it was discovered that magnetic field strength could be increased and cells deep inside the body could be influenced.

Blood has iron molecules in it and studies showed that circulation was enormously improved and that the intake of oxygen by body cells went up exponentially. They also discovered that the increase

in bone density healed fractures.

After two sessions on the magnetic pads, Hartzenberg’s husband’s swollen ankles were cured and he has only required treatment for his spine every few months. Hartzenberg has many other success stories, saying that the treatment is visibly beneficial for people suffering from arthritis and rheumatism.

Although there is a whole list of ailments ranging from acne to sclerosis that also benefit from magnetic healing. What about mind power? “Yes, the power of the mind does play a role. Successful treatment can depend on the expectations and belief of the patient, trust in the therapist, the care and respect received from the therapist and the action as well as the ritual of the treatment.”

“When I arranged to buy the machine, the supplier put me in contact with a professor Friedman from the Israeli university, who informed me that he will be teaching me everything he knows about magnetism and magnetic healing. At first I was quite intimidated and told him that I just wanted to buy the machine for my husband’s pain, and didn’t want to learn all that! He replied that we serve the same Master and that I should use this to help other people. He taught me about magnetism and the psychology of pain.”

“I found out that the

machine was used mainly on soldiers and athletics as it resulted in rapid healing. The Israeli Olympic team swear by it.” Hartzenberg laughs.

I have also completed energy medicine courses up to level six, and incorporated this form of healing with magnetic energy healing.”

“I love my magnetic machine and I love working with people and making a difference in their lives.” Hartzenberg also uses the machine on herself and says that it is good for burns, cuts, sinus problems, headaches and so the list goes on.

Before the practical part of the session, Hartzenberg inquires about the health of the patient and then sets the frequency to match the problem. I have suffered from neck and back pain after a recent car accident. So that was what the focus was on. It is now my turn to experience the magic power of magnetism. I lie on the bed fully clothed and am covered with the quilt. Hartzenberg lights a candle (to remind her who is really doing the healing, she explains) and puts on some soothing music. While lying on the bed you cannot feel much, though the magnets are surrounded by wire coils which intensify the magnetic effect. They are also covered with a soft casing to make it as comfortable as possible. The magnets are in three different mats of different sizes and strengths, the first mat is like a small camping mattress and that is of the lowest frequency. The second is like a pillow which is stronger and the smallest can be placed

between the feet to give the area maximum exposure.

The session begins and I am left alone . . . At first I feel quite tearful, as I tend to do in most therapeutic sessions, but then I feel as peaceful and happy as the dolphins in the pictures on the wall. She encourages me to go to a place where I am happy and leaves me in peace. I imagine that I am at a beach in Camps Bay and the only other people on the beach are my siblings.

It is a beautiful vision, something which I am not inclined to experience, as I tend to bring back pleasant memories instead of imagining new ones.

The underlying thought going through my head is — please don’t let this end. Please just leave me here for two weeks. The sensation is very dreamlike, similar to being massaged, but far more subtle. For the rest of the day I have the energy of a child, my usual bedtime is extended by three hours as I just don’t feel tired. Running around spending energy also improves my appetite and instead of snacking, I eat large, healthy meals. This increase in energy and appetite must also be the reason why her patients have such a good recovery rate. The treatment really results in a feeling of vitality — and my back and hip pain is gone.

Hartzenberg divides the hour session into two separate half hours.

• You can contact Wini Hartzenberg at 033 347 1862 or 083 321 3753. Sessions are R150.

THOUSANDS of primary school pupils were visited by a team of health care workers from different health programmes within the department as part of the National School Health Week initiative. This initiative ran from October 10 to 14.

The initiative, held in collaboration with the Department of Education, was spearheaded by the programme responsible for school health.

Staff from the programme co-ordinated the visits and activities around this week. No fewer than 131 schools were involved during this project of promoting healthy lifestyles among learners. Taking part in the project were staff from different health programmes, namely: nutrition, rehabilitation and disability, health promotion, mental health, environmental health and oral health.

Armed with toothbrushes, toothpaste and eye screening charts, staff began to teach the pupils about the importance of good health.

They also taught the pupils how to fight against diseases and conditions such as tooth decay, which could be prevented only if children were taught and screened at an early age.

Pupils were screened and assessed and those who required further medical attention and treatment were referred to local health institutions.

Co-ordinator of the National School Health Week in KwaZulu-Natal, Esther Snyman, said the department used the week to strengthen the existing school health programme in the province.

"In February this year the department launched a school health policy. National School Health Week initiative was a considered effort to help us strengthen, improve and implement a co-ordinated service at school which includes all health programmes, thus improving our existing programme in KwaZulu-Natal," said Snyman.

She went to say, "The initiative afforded us an opportunity to critically look at what needs to be done and what we have and try to co-ordinate this with the Department of Education and the Department of Social Welfare and Development, and use the limited resources we have together."

The screening will also assist the department in channelling health issues and priorities accordingly, especially at school level.

"If a lot of pupils had problems with sight, hearing or dental health we would then know exactly what areas need more emphasis," said Snyman.

The pupils were also addressed on social issues such as HIV and Aids, substance abuse and child abuse.

It is envisaged that this programme would be expanded to include secondary schools.



Staff from the Department of Health visited schools in KwaZulu-Natal to screen and assess pupils in primary schools. Here a nurse speaks to pupils from a school in the Ugu district about the department's oral health programme.

If you are healthy and you know it — WASH YOUR HANDS!



LEFT: A nurse from the Department of Health tests pupils' eyesight at a school in the Ugu district.

FAR LEFT: Pupils get their teeth checked.

LETTERS

HOSPITAL THANKED FOR SUCCESSFUL DELIVERY

I WOULD like to extend my heartfelt thanks to Dr Kesene for the excellent way in which he assisted me through my labour at the Mahatma Gandhi Memorial Hospital.

My baby was quite large and I found it very difficult to deliver but I am grateful for the patience he had and the comfort he gave me. Although I'd thought I would have had to have had a Caesarean, I success-

fully delivered my baby normally.

Thank you, Dr Kesene. I appreciate your services and the confidence you gave me.

I'd also like to thank the nurses in the labour ward for their excellent services. Thank you for the smiles and the your care. You have reassured me that the Mahatma Gandhi Memorial Hospital is a good one.

M. GOVENDER

PENSIONERS GRATEFUL FOR CARE

I DON'T know how to express our gratitude to Dr Chowdhury, chief medical officer (ophthalmology) at Stanger Hospital for his co-operation — with the help of top health management — in connection with obtaining treatment for patient S. Z. Mahanjana on a very busy day.

I cannot find the appropriate words to say thank you to him and his efficient staff (Sister Mavundla and

assistants), for receiving Mahanjana and myself warmly and exercising such wonderful care and treatment, thus wiping out any pain and frustration.

Since we are pensioners it was not easy, financially, to attend your clinic but the strain was alleviated by your continuous caring and encouragement.

M. J. MAHANJANA

“EVERYONE should see a chiropractor as a matter of course every six months,” says Dr Mark Kidson, one of only four chiropractors practising in Pietermaritzburg.

Kidson describes himself as a neuromusculoskeletal specialist. “In other words, I am a nerves, muscles and bones doctor,” he explains.

Kidson was persuaded to follow this career by the benefits he experienced from being treated by a chiropractor. His fascination with and knowledge of the workings of the human body is immediately apparent and he admits that he is pedantic and ridiculously thorough.

A chiropractor’s expertise lies with the nervous system and the biomechanics of the body made up of the joints and musculature, and understanding how the body moves, correcting inappropriate and inadequate movement. The foundation of a chiropractor’s treatment is that a healthy nervous system, in particular the spine and its nerves, is the basis of good health.

“Chiropractic is the most well researched of all the medical disciplines because we are the most challenged,” Kidson remarks adding that it is the third largest healthcare profession. Chiropractic is considered a form of alternative healthcare, although chiropractors are primary contact practitioners in their own right, closer to a medical doctor than any other healthcare provider. The main difference is that chiropractors carry out treatment without drugs or surgery. “Surgery should always be seen as a last resort, although I usually refer patients to other healthcare professionals when necessary.”

Chiropractors are well-known for adjustment, which is the term for the type of spinal manipulation that is unique to the profession. “There are 32 different effects of adjustment ranging from restoration of neurological function, improved joint movement and an increased blood supply.” Kid-

son says. One of the most frequent roles a chiropractor fulfils is to restore the biomechanics or normal movement. Kidson explained that at any given moment 60% of all the information going to the brain comes from the joints and musculature, telling the brain where they are in space, what position they are in and how much pressure or tension they are under. The brain processes this information and makes the appropriate response. Should a problem arise with a joint, this changes the reaction from the brain and the spinal cord and leads to problems that can affect the entire body, even the internal organs.

Chiropractic is suitable for all ages with Kidson’s youngest patient being three days old and his oldest patient 96 years old. He says that chiropractic care is suitable for a variety of conditions in babies, such as colic. Another common childhood ailment is ear infections, usually an infection of the middle ear due to a blocked Eustachian tube (the tube that connects the middle ear to the nose). Adjusting the upper neck often unblocks the Eustachian tube, allowing it to drain and prevent re-infection.

Kidson has a special interest in the treatment of headaches and migraines and says: “93,8% of headaches and migraines can be traced to problems in the neck, which can be effectively treated by a chiropractor. The benefit of a chiropractic treatment with headaches is that you are removing



Dr Mark Kidson, one of only four chiropractors practising in Pietermaritzburg.

the cause of the problem and not just masking the symptoms with painkillers.” A staggering 60% of children suffer from headaches, 30% of these suffer from chronic headaches. On a related topic Kidson says that he treats a lot of children who suffer from Attention Deficit Hyperactivity Disorder (ADHD). “Ninety percent of children with ADHD are also headache sufferers,” he says, but points out that it is not the ADHD that he is treating, but the

headache. “Once the headache has gone the ADHD symptoms decrease markedly. It’s quite logical — of course a child that has a constant headache will lack concentration and be disruptive, symptoms of both conditions.”

Another leading cause of absenteeism from work is lower-back pain. This condition is regularly managed by chiropractors and has been found to be the most effective and cheapest means of managing this debilitating condition.

Although chiropractors are best known for treating spinal complaints, they are by no means limited to this. The whole of the musculoskeletal system is within their scope of practice including whiplash, sprains, slipped disc, pinched nerves, stiff neck, locked jaw, lower-back pain, sciatica, rotator cuff injuries in the shoulder, tennis elbow, carpal tunnel syndrome, arthritis, knee injuries and groin strain. Other conditions which can also benefit from chiropractic treatment are sinusitis, asthma and irritable bowel

syndrome.

When Kidson sees a patient for the first time he takes a detailed history. “Seemingly insignificant injuries can start causing problems years later,” he says. “A correlation between the current situation and a past injury can go a long way towards administering the appropriate treatment.” He adds that most people experience symptoms of accumulative injury between the ages of 40 and 60. Kidson will carry out a neurological examination during which he checks the reflexes and muscle tone. An orthopaedic examination will reveal whether the joints are working as they should be. Kidson also makes extensive use of X-rays and ultrasound. Other diagnostic tests such as blood and urine tests are also carried out when necessary.

“I don’t just treat patients but also try to get some insight into their lifestyle and the environment they inhabit.” Kidson says, adding that a new bed or correcting how or where a person sits can sometimes be the difference between a life of discomfort and one that is pain-free. “Joints are dynamic structures, made to be moved, which is important for their wellbeing. It is important to provide advice on how some lifestyle and environment changes, in conjunction with chiropractic treatment, can help.” Kidson also provides patients with exercises and corrects poor training techniques in sportsmen and women that could be contributing to their problems. He says this type of holistic treatment provides a better outcome.

Being a sufferer of lower back pain caused by a slipped disc and desperate for some relief, I have surrendered myself to his capable hands. If he manages to help me I will laud his talents all over Pietermaritzburg!

Using the energy system to dispel disease

INEZ WALES

“ENERGY medicine is a very specialised form of healing. There are only seven energy medicine practitioners in South Africa,” says Naomi Gevers, who practises energy medicine and kinesiology in Pietermaritzburg.

“I grew up in a home where complementary therapies were the norm,” she says, explaining how she became involved in energy medicine, “When I had children of my own, it became evident to me that antibiotics were not always the appropriate way to deal with illness and so my search for holistic health began. When my children started leaving home, I decided that it was a good time to start a new chapter in my life.

“For three years I studied kinesiology and in September 2004, I heard about a Transform Your Life through Energy Medicine (TYLEM) course. Having been for successful treatments with Brenda McFie, an energy medicine practitioner and instructor, I didn’t hesitate to enrol.”

“Dr MaryJo Bulbrook is the founder and president of Energy Medicine Partnerships Inc. She developed the programme by drawing on her 20-year career as a university professor of nursing in the U.S., Canada and Australia, as well as from her expertise as a specialist in psychiatric mental health nursing and working with renowned family therapist Virginia Satir. We believe that all diseases have a physical, emotional, mental and spiritual aspect. An imbalance in any of these dimensions can compromise the health of an individual.”

Bulbrook will be in Pietermaritzburg this month offering courses.

Gevers says that kinesiology has given her an excellent foundation and that it is a powerful tool to facilitate healing. Energy medicine has added another dimension to her work. “We know that every thought we have



Photo: IAN CARBUTT

Naomi Gevers . . . ‘we know that every thought we have affects us in some way or other’.

affects us in some way or another and that everything that happens to us is registered in the energy system. This awesome modality, energy medicine, is the art and science of healing through the energy system. It integrates complementary therapies with traditional health care using an holistic approach to healing. It assists in stress reduction, pain management, addresses illnesses, changes limiting beliefs, heals family and relationship issues, recovery from trauma, coping with loss, removes past hurts, fears and disap-

pointments,” explains Gevers.

Regarding the process of healing, Gevers says: “There are five parts or options in which we work.

“Part one: clearing the self — here we work to balance the inner self, to allow healing of injuries, self-abusive actions, mental confusion and assist those who have no direction in life. We also clear the energy field of debris.

“Part two: healing wounds — this is pretty self-explanatory. Here we deal with wounds that may be on a physical, emotional, mental or spiritual level.

“Part three: changing limiting beliefs — beliefs are stored in the energy field and influence how we lead our lives. Beliefs that may be adversely affecting our lives are learnt about and replaced with ones that better serve our highest potential.

“Part four: healing relationships — healthy relationships are essential for personal well-being. There is a movement of energy in most relationships, particularly in close relationships where we form etheric ties to each other which allow us to send and receive energy. This can compromise the individual’s health by draining him or her of energy or it can feed the energy system with negative energy. Here the healer will free the client of the ties affecting personal growth.

“Part five is divided into two — healing anguish and reshaping family energy patterns. Each of these parts has interventions designed to deal with that particular aspect of life.”

Gevers adds, “To qualify as a energy medicine practitioner, you have to complete the course, parts one to five, and a practical to demonstrate competency. In addition, you have to submit 50 documented sessions that demonstrate expertise in client care management.”

Gevers explains what a client could

expect when they come for a session: “It starts by obtaining client details and discussing the issue they have come for. It’s often helpful to do a short meditation and a drawing.”

Gevers might ask the client to draw an angel, crystal or medicine-card to support what insight has been gained on the issue. Then it is important to set a goal pertaining to the issue. This can be seen as a gift that you want to give yourself and stated in the present tense. An example may be: “I release the past and move forward with courage, strength and love.” All the work that follows is in relation to that goal. The client will get onto the therapy bed and the practitioner will do a pre-assessment of the energy field. This gets documented and represents what is happening in the energy field in relation to the issue that is being worked on. Then follow the interventions. This is where the practitioner works in the energy field, which includes the seven levels of the aura, chakras, the hara line and the core star. At times the healer will be touching the client lightly and at other times the healer will be working in the energy field.

“Once this has been done, I do a post-assessment of the energy field, a closing blessing and end the session by grounding the client before they get up.”

Gevers gives her clients self-care homework, which covers each of the aspects of self — the mental, physical, emotional and spiritual.

“I just love this work and pray every day that it may be blessed and guided, and that I may work only in truth, with integrity and unconditional love, and in the light,” Gevers says.

• Information on energy medicine can be obtained from www.energymedicinepartnerships.com

• For more information on the courses, contact David Hazelhurst at 033 342 1928 or e-mail ecabazini@futurenet.co.za

BREAST cancer is a life threatening and relationship-threatening trauma. When we marry the man or woman of our dreams, we expect to be together for a lifetime, despite the unfavourable odds of six out of 10 marriages ending in divorce.

We truly believe that we will be together "for richer, for poorer, in sickness and in health, until death us do part". And then life intrudes: becoming a couple, learning to balance needs, the joy and awesome responsibility of parenthood, managing careers and handling money. If a marriage is sound, it can weather any storm, survive virtually any trauma.

There is no magic formula for surviving and growing through the trauma of facing a diagnosis of breast cancer, the subsequent treatment and its impact on life together thereafter. God, it is said, gives us challenges to build character; both husband and wife are presented with a great opportunity to build character, to create a lifetime love story.

At 36 I am a survivor of two episodes of breast cancer, spaced two years apart. However, that does not define me. I am also a wife, daughter, sister, friend and career woman. I am alive and well, still sexy, with one reconstructed breast and one normal breast, and am an inspiration to other women facing this disease. I have discovered my worth and treasure every moment of living.

As this is a particularly traumatic time for husbands, I would like to offer the following suggestions, based on my own hard-earned experience. Be there for your wife and help her to discover the survivor within.

Tell her you love her.

In a marriage, or any intimate relationship, silence is not golden. The strong, silent type need not apply for the position of husband, lover, best friend, confidante and supporter of a woman with breast cancer. Your partner needs, and wants, to hear from you. It is said that actions speak louder than words but the spoken word brings comfort, reassurance and verification of your inner feelings. She cannot read your mind and without your verbalisation, all sorts of fears will take root in her mind. Being there for her is more than physical or economic security. Words have special meaning. The three most important words in the moments when, together, you are facing her mortality, are: "I love you."

We know that the act of laughing is itself healing. It is very easy to take ourselves and our careers much too seriously. Close friends have experienced our occasional over-the-top, out-of-control laughing and true guffaws. Can anything feel better? You cannot laugh while you're feeling sorry for yourself. Seeing the humour in any situation brings relief and release. Humour is healing to body, mind and spirit, so make her laugh, tickle her, tease her.

Men talk about being "leg men" or "breast men" with bravado and sophomoric stupidity, as if large breasts or great legs have anything to do with being a woman. Your partner, your lover, your wife needs to know that you love who she is, not what type of body she has or the size of her breasts. God created a matching set that fit together nicely.

Lynn Moore . . . a survivor of two episodes of breast cancer.



'I WILL SURVIVE'

Cancer survivor LYNN MOORE gives advice to men whose wives or girlfriends need their support during their battle against cancer.

Your partner needs reassurance in the face of an assault on her femininity and sense of womanhood. She needs to know, by what you say and what you do, that this set of circumstances is not the end of your sex life but rather a new and exciting, although initially frightening, sex life with heightened sensitivity and caring.

Go to the multitude of appointments with your wife, as much as you can. You are more than a helpless spectator cursing the damned disease. You have joined the battle. You are helping wrest control from the cancer, along with your wife, the treatment team and the support system around you.

There is also a practical side. Hearing a diagnosis of cancer overwhelms the senses. Doctors try to help you to understand, but the daily jargon they use might as well be classical Greek. With two of you there, there are two sets of ears to hear what is said. There are two mouths to ask questions. This helps avoid the tendency to hear what you want to hear. Being with her each time will reassure her, help her overcome her fears and make you feel good about yourself. She'll love you for it.

Your wife or partner won't break. Treatment can be gruelling and tiring, but you both need to live your life as

fully as possible. Continue to enjoy what you enjoy individually and as a couple. You need to take your cues from her. She knows what she can do, or how tired she may be feeling. When she's ready, encourage and support her. When she's ready, get out and do things with her. Your time together might be short and you should live each moment together fully.

Sex is another area where a man needs to let his partner lead. She will let you know what works now and what doesn't, what she's ready for and what she's not. A husband might even mourn the loss of her breast as she did, as well as the change in some aspects of love-making that result. The important thing is that life and your love-life go on. In the first weeks, months and even years, your sex life may take on an added dimension that is simultaneously painful and exquisite. Imagine how it feels to make love to someone you feel you might lose. You don't want to hurt her. You can give her bear hugs both during and outside your lovemaking.

You need to understand that your partner is also the answer to your caricature male mid-life crisis. The answer is not a young bimbo or colleague with whom to start your next marriage or your next family. It is not a sports car or a new set of golf clubs.

It is your wife. Rather than have an outside relationship, whether sexual or emotional, as a result of that midlife crisis, how about a fling with your wife? Take her away for a weekend at a romantic bed and breakfast, go for a leisurely walk, a good movie, a show at the theatre and an after-show dessert. Fall in love. Stay in love. Be in love.

Can you imagine yourself in the shoes or the mind of a person with cancer? Can you understand what intimacy is like, sexual and otherwise, when all your senses are stretched and heightened by the knowledge you're making love to a woman you could lose? You find joy to the point of pain. You discover a profound sense of being one with each other and yet there is awareness that it could be fleeting. Reality may break in and shatter the moment but you persevere. A good marriage or solid relationship will not only get through the trauma of breast cancer, the marriage will be strengthened and be the better for it.

Your partner is not damaged goods, with or without breast reconstruction. She remains the woman you fell in love with. Get beyond the inner thoughts never expressed, wondering whether your lovemaking was altered forever. You, too, may miss her breast, as it has brought you both pleasure in the past. Now is the time to live your life to its fullest together. You'll both survive and thrive if you stay together.

“ You are more than a helpless spectator. ”

Show your solidarity for those living with HIV/Aids

KAVITH HARRILAL

IN a show of solidarity and support for people living with HIV or Aids, as well as those affected by the pandemic, government will drive various events and initiatives over the next few weeks.

The spotlight will shift to KwaZulu-Natal, as the province will host this year's National World Aids Day event.

In one such activity, hospital admin-

istrators, doctors, nurses and other health care workers will form a human chain later this month. The event will take place on November 25 in all nine provinces and will be co-ordinated by the various hospitals' public relations officers. The grounds and lawns of the hospitals and clinics are expected to be transformed into colourful arenas during the event.

However, this initiative is not the only activity planned during the build-

up to World Aids Day on December 1.

Members of the public from around the country have been urged to participate in a pledge-a-thon in the run-up to World Aids Day.

While monetary donations will be accepted as a pledge, the idea of the pledge-a-thon is to encourage every member of the public to make a commitment toward contributing meaningfully towards the fight against HIV and Aids.

The pledge can be a personal commitment related to one's own sexual health, or even a commitment to helping others living with the disease, in keeping with this year's theme of "A Nation Caring for Life".

The national Health Department will supply postcards on which the pledge can be written and posted into a box made available at hospitals and clinics. The pledges will be counted at the World Aids Day event.

CONTACT NUMBERS

IF you have any inquiry, comment or suggestion about Unwele Olude, please do not hesitate to contact us at Communications Directorate,

Private Bag X9501, Pietermaritzburg, 3201; fax 033 342 0429; or e-mail us at xabap@dohho.kzntl.gov.za

**24-HOURS OPERATIONS CENTRE: 0800 005 133
AMBULANCE: 10177
AIDS TOLL-FREE HOTLINE:**

**0800 012 322
OMBUDSMAN: The Ombudsman, Private Bag X9501, Pietermaritzburg, 3201; fax 033 394 0584.**